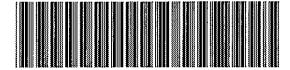
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Office Use Only



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R.A. Change

T BROWN JAN - 6 2003



ACCOUNT NO. : 072100000032 REFERENCE : 875348 4720431 AUTHORIZATION COST LIMIT ORDER DATE: December 30, 2002 ORDER TIME : 8:17 AM ORDER NO. : 875348-245 CUSTOMER NO: 4720431 CUSTOMER: Ms. Tina Grodziski Charming Shoppes, Inc. 450 Winks Lane Bensalem, PA 190200000 CHANGE OF AGENT NAME: FASHION BUG #3389, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY

EXAMINER:

CONTACT PERSON: Troy Todd -- EXT# 1140



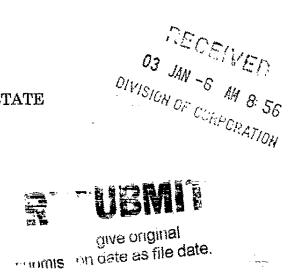
FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

January 3, 2003

CSC TROY TODD TALLAHASSEE, FL

SUBJECT: FASHION BUG #3389, INC.

Ref. Number: P99000095198



Letter Number: 103A00000222

We have received your document for FASHION BUG #3389, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Teresa Brown Document Specialist

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	*	17.0502, 607.1508, or 617.1508, Flo	
this statement of cho	•	on organized under the laws of the Sta	•
Florida	_in order to change its registe	red office or registered agent, or both	i, in the State
of Florida.			
1. The name of the o	corporation: FASHION BUG #3389,	, INC.	<u> </u>
2. The principal offi	ce address: 1270 North Wickham	Road, Melbourne, FL 32935	93 A.
3. The mailing addre	ess (if different): 3750 State Roa	d, 7B13, Bensalem, PA 19020	The second
4. Date of incorpora	tion/qualification: October 28,	Document number: P990000	095198
5. The name and stre Florida Departme		red agent and registered office on file v	vith the
ст	Corporation System		
120	0 South Pine Island Road		
Pla	ntation, FL 33324		t.
6. The name and st changed):	treet address of the new register	red agent (if changed) and /or registe	red office (if
Corp	poration Service Company		4 -
120	1 Hays Street (P.O. Box or personal ma	ilbox NOT acceptable)	
_Tal3	lahassee, FL 32301	-	
The street address of agent, as changed w	of its registered office and the straight of t	reet address of the business office of i	ts registered
Such change was at authorized by the be	ithorized by resolution duly ado oard, or the corporation has been	pted by its board of directors or by an n notified in writing of the change.	officer so
Signature of an officer, chair	rman or vice chairman of the board)	Maureen Cullen, Attorney-in-Fact (Printed or typed name and title)	·
I further agree to co performance of my registered agent. ()	omply with the provisions of all duties, and I am familiar with a Dr. if this document is being filed	it and agree to act in this capacity. statutes relative to the proper and coi nd accept the obligation of my positio I merely to reflect a change in the reg on has been notified in writing of this c	n as istered
/ (Signate	M. GUDA irc of Registered Agent)	December 31, 2002 (Date)	<u>.</u>
If signing on behalf of	an entity:		
Jacqueline M. Gil (Typed	es or Printed Name)	Assistant Vice President (Capacity)	

* * * FILING FEE: \$35.00 * * *